



# MENTAL HEALTH OF WOMEN TEACHERS OF SECONDARY SCHOOLS OF MEGHALAYA

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## ABSTRACT

Today Mental Health is a wide issue, which concerns everyone, and it is not just the absence of mental disorder. According to the WHO (2015), defined mental health as a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. According to the WHO (2012) in its document on Risks to Mental Health discusses on the various determinants of Mental Health and well-being. Mental Health and well-being is influenced not only by individual attributes, but also by the social circumstances in which persons find themselves and the environment, and may threaten or protect an individual's mental health state. The teaching profession demands women teachers to perform efficiently, keep updating teaching and social skills and learn technology as well as the home demands of attention by children, old parents and household activities, puts enormous stress on them. The women teacher's mental health not only contributes to better mental health of pupils but is essential for her own efficiency and happiness. Women teachers play a major role at home and in school which requires them to be in sound state of mind. The present study was conducted to examine the Level of Mental Health of Women Teachers of Secondary Schools of Meghalaya. For carrying out the study the investigator used self-constructed questionnaire and adopted survey method in which 405 women teachers from four districts of Meghalaya are selected as sample for the study. The results from the findings are discussed in the paper.

**KEY WORDS:** Mental Health, Women Teachers.

## 1. INTRODUCTION:

Today, in this 21st century Mental Health of women is a wide issue which concerns everyone. According to the WHO (2015), defined mental health as a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Three of the most studied and important qualities associated with conditions of stable mental health of women include the way she thinks, the way she manages emotions, and the way she behaves in interpersonal relationships. It can be rightly said that, women with stable mental health will likely possess a degree of flexibility in how she thinks about herself, about others' life situations, and understands available options for the future. Women teachers face many challenging situations, which may be stressful at times, and studies have shown that women teachers are more stressed out than men teachers. They encounter many adjustment problems in their work place and these problems may seriously affect their role at home and in the society leading them to become dissatisfied with their work and life itself. Mental health problems are of different types; some are caused from the environment while others come without our awareness. But a mentally healthy woman teacher has the ability to bounce back from adversity, trauma and stress. They are able to cope with difficult situations and maintain a positive outlook. They remain focused, flexible and creative in bad times as well as good times (Khan, 2017).

### Impact of Women Teacher's mental health on students:

The woman teacher's personality has a great bearing on the personality development of the students. It is stated that books can teach, only personality can educate. Various researches have proved that emotional stability of the teachers affects the learners. The character and the personality of the students cannot be developed to its fullest if the woman teacher who is the model to be followed lacks character and personality. As the aim of education is to mould the behavior of the learner to a preplanned well-accepted manner, such modification of behavior can be found in one's healthy attitudes, good habits, standard values etc. In schools, woman teacher personality remains vital experience for the students to examine and imitate. Through continuous identification and introjection's child consciously acquires and learns the habits, attitudes, personality and character from the teacher.

Women teachers who are competent and emotionally matured make the total school atmosphere full of learning experience for the students. On the other hand incompetent and maladjusted teachers spoil the school atmosphere. Unsatisfied frustrated women teachers cannot make students happy and well-adjusted in the school. Women teachers should be mentally alert and stable to develop alertness and stability in students. The woman teacher's behavior will reflect the student's behavior.

### Causes of Mental health Problem in Women Teachers:

Women teacher's mental health not only contributes to better mental health of pupils but is essential for her own efficiency and happiness. A woman teacher with mental health problems not only destroys her own professional life but also ruins her student's life. There are many factors which contribute to women teachers'

mental health problems. Some are discussed below:

- 1. Lack of professional attitude and spirit:** Most of the women teachers in schools accepted teaching as a profession not because of their interest and passion in teaching but because they failed to secure other jobs. Such women teachers naturally lack professional attitude and spirit.
- 2. Work load:** The duties and responsibilities of women teachers are always very high and an average woman teacher is always under stress. The constant stress creates emotional tension and anxiety that impair the mental health of the teacher.
- 3. Insecurity of service:** Services in privately managed schools are generally insecure. The women teachers in such schools live up on the mercy of the management of that school. There is a constant fear of going out of that service. This creates anxiety and fear in the minds of the women teachers.
- 4. Poor salary and low status:** In the present social set up of India women teachers are poorly paid when compared to their less qualified counterparts in other professions. Added to this in our society, women teachers are not getting enough respect and recognition. This may lead to the demotion of self-concept of the teacher which ultimately results in maladjustment. According to Tinio (2008) the chairperson of the Alliance of Concerned Teachers (ACT) wrote in an article that teachers and other members of the country's middle class are being pushed closer to poverty brought about by global economic crises. He stressed that teachers are seriously underpaid compared to those who have equal qualifications from other agencies of the government. Teachers are the actual builders of the nation but they have not been recognized as such by the government (Frufonga, 2015). Overall teachers today are not rewarded for taking on challenging assignments, having special skills and knowledge or exhibiting outstanding performance.
- 5. Lack of recreational facilities:** Women teachers seldom get the time for recreation or rest. Lack of recreational activities in schools and teachers' aptitude to participate in them makes their professional life dull and uninteresting.
- 6. Low of physical health:** Women teachers' bodily health is not satisfactory. Low income and lack of recreational facilities are the reasons for this. Low physical health is an important factor for low mental health.
- 7. Maltreatment of management:** Most private schools in our country are managed by the persons of particular caste, religion or creed. Consequently, it becomes difficult for a woman teacher from a different caste to adjust. Most often she may get step-motherly treatment from the managements. This causes worry and mental stress in the mind of a teacher.
- 8. High moral expectations:** Women teachers are often expected to behave like an ideal exemplary by the society. But this is not possible because of the

high complexities of fast-moving society and it is natural that evils of society may affect her personality naturally in course of time. The failure to rise up to the expectations of the society creates frustration and conflicts in the mind of the women teacher which results in mental health problems.

**9. Unhealthy inter-personal relationship among teachers:** Inter-personal conflict and tensions among women teachers is at peak due to the increasing number of professional organizations and teacher politics. Harmony, co-operation, love, unity spirit, good-will of the institution etc has vanished from the teacher's room.

**10. Lack of facilities:** Poor school plant, ill-equipped classrooms, faulty time schedule, lack of library and laboratory, shortage of teaching aids etc creates unnecessary stress and strain in women teachers.

A mentally healthy and well-adjusted women teacher plays a vital role in promoting mental health of students. Only if the women teacher is free from worries, anxieties, and tensions then only she can impart the function of promoting mental health and mental hygiene. Thus, in order to develop sound mental health in student's a teacher herself should pose sound mental health. The general stability of the women teacher is of utmost importance in balance and controlled emotional development of the students. Any slight mental imbalance or temperamental instability of the teacher will be reflected in the student's behavior. According to Chang (2009), found that teachers who does not feel being cared, student's feedback can affect teacher's experience and perception of bad feelings. Women teachers should be mentally alert and stable to develop alertness and stability in students. The women teacher's behavior will reflect the student's behavior.

#### Relationship between Stress and Mental Health of Women Teachers:

Women's mental health is one of the most important issues of our society that need proper attention. There is a close relationship between stress and mental health. For the last decade the term stress has enjoyed increasing popularity in the behavioral and health sciences and through the process of time; many treatment have been applied in an effort to address this complex health problem (Papathanasiou, Tsaras, Neroliatsiou, & Rounpa, 2015). Teaching is a demanding profession and women teachers are stressful at the end of the day due to workload, pressure by the management etc. Research studies revealed that women teacher experiencing low stress is in a position of positive mental health and vice-versa. Positive mental health and wellness of women teachers is a condition when she is able to realized her potential, cope with the stresses of life, work productively and make meaningful contributions to her community. Stress can have considerable impact on the mental as well as emotional well-being of an individual. Some symptoms of mental disorder vary on the type and severity of the condition. Some general symptoms that may suggest mental illness in women teachers include.

- i. Confused thinking
- ii. Long- lasting sadness or irritability
- iii. Extremely high and low moods
- iv. Excessive fear, worry or anxiety
- v. Social withdrawal
- vi. Dramatic changes in eating or sleeping habits
- vii. Strong feeling of anger
- viii. Delusion or hallucinations (seeing or hearing things that are not really there)
- ix. Increasing inability to cope with daily problems and activities
- x. Thoughts of suicide
- xi. Denial of obvious problems
- xii. Many unexplained physical problems
- xiii. Abuse of drugs and/or alcohol

Mental health is the key to wholesome adjustment (Schneiders, 1960). Good mental health is not just about the absence of mental health problems. But being mentally healthy is much more than being free of depression, anxiety or other psychological issues. Rather than the absence of mental illness, mental and emotional health refers to the presence of positive characteristics. In order to maintain and strengthen mental health the primary thing to do is to pay attention to our own needs and feelings. Taking care of our body is a powerful step towards achieving mental health since the mind and the body are linked together and work dependently. When the physical health of women teachers is improved, they will automatically experience greater mental and emotional well-being.

With these considerations, the investigator's attention is to study the mental health of Women teachers of Secondary Schools. The objective is to investigate the mental health of women school teachers based on locale, society, marital status, educational qualifications, teaching experience, management, age, training and age.

## 2. REVIEW OF LITERATURE:

Kothival (2013) focused on the mental health of Professor and Primary Women teachers and found that there was clear difference between the Professor Women Teachers and Primary Women School Teachers. The difference clearly justifies that Professors Women teachers are under more mental stress in comparison to Primary Women teachers. Grosy, Panwar, & Kumar (2015) conducted a study to

access the level of personal mental health of school teachers, particularly those who work in public sector schools. The study revealed that there is a significant gender difference among government school teachers. The male school teachers were found to have better mental health than their female counterparts. Nagai, Tsuchiya, Touloupoulou, & Takei (2007) found that poor mental health of teachers was associated with job dissatisfaction. In another study by the majority of the secondary school teachers reported low satisfaction with the teaching career, majority are unaccountably tired or exhausted. Patel (2013) conducted a study to find out the mental health and job satisfaction of working women teachers of private and secondary schools. The findings revealed that the mental health and job-satisfaction of the women teachers from the State school are more satisfied than the teachers from private school. Mohana (2013) focused on the mental health of teachers in relation to level of teaching and experience. The results revealed that teachers belonging to different level of teaching and teaching experience do not significantly differ in their mental health. Rani & Singh (2012) conducted a study on the mental health of teachers in relation to gender and types of school. The study revealed that women teachers of private schools are more superior to their counterparts in the domains of security-insecurity and self-concept whereas the women teachers of Government schools are more superior to their counterparts in the area of intelligence. It was also found that the primary school teachers are average in their level of mental health. The male teachers were superior to female teachers in emotional stability and overall adjustment. Goswami (2013) conducted a study to see how teachers' burnout is related to different aspects of job satisfaction and demographic characteristics. He found that job burnout of teachers leads to the decrease of job satisfaction. Also, the demographic variables like age and area of work place affect job burnout.

## 3. OBJECTIVES OF THE STUDY:

- i. To find out the Mental Health of Women Teachers of Secondary Schools of Meghalaya.
- ii. To find out the differences in the level of Mental Health based on the following criteria (a) Locale, (b) society (c) Marital Status, (d) Educational Qualification, (e) Teaching Experience (f) Management (g) Age and (h) Training.

## 4. HYPOTHESES:

**Ho:** There is no significant differences in level of Mental Health among Women Teachers of Secondary Schools based on (a) Locale, (b) Community, (c) Marital Status, (d) Educational Qualification (e) Teaching Experience (f) Management (g) Age and (h) Training.

## 5. RESEARCH DESIGN:

This study used the survey method to study the Level of Mental Health of Women Teachers.

- i. **Population:** The population for the study comprised of all 2282 Women Teachers of Secondary Schools from East Khasi Hills District, West Khasi Hills District, West Jaintia Hills District and Ri- Bhoi District of Meghalaya.
- ii. **Sample:** The sample for quantitative strand comprised of 405 Women teachers of Secondary Schools, selected using stratified random sampling which is proportionate in nature.
- iii. **Tool:** The tool used was a self-constructed scale i.e Mental Health Scale of Women Teachers (MHSWT).
- iv. **Statistical Analysis:** For analyzing the quantitative data mean, standard deviation and 't' were used.

## 6. RESULTS AND DISCUSSION:

The results for the analysis of data is presented as per the objectives and research questions

### A. Mental health of women teachers of secondary school of Meghalaya:

The first objective was to find out the Mental Health of Women Teachers of Secondary Schools of Meghalaya.

**Table1: Mental Health of Women Teachers of Secondary Schools**

Z Score	Scores	Level	Frequency	Percentage
+2.1 and above	157 and above	Excellent	04	0.98
+1.51 to +2.0	148- 156	Very Good	22	5.43
+1.1 to +1.50	140-147	Good	36	8.9
+0.51 to +1.00	131-139	Above average	69	17.04
+0.50 to -0.50	130-115	Average	148	36.54
-0.51 to -1.00	114-106	Below average	65	16.05
-1.1 to -1.50	105-99	Poor	28	6.9
-1.51 to -2.0	98-90	Very Poor	27	6.67
-2.1 and below	89 and below	Weak	06	1.48

From Table 1 it is observed that 0.98 % Women teachers have excellent mental health, 5.43% have very good mental health, 8.9 % have good mental health, 17.04 % are above average in mental health, 36.54% are average, 6.9% are poor, 6.67% have very poor mental health and 1.48% have weak mental health.

#### Hypotheses One:

**Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary School based on Locale, Society, Marital Status, Educational Qualifications, Teaching Experience, Management, Training and Age.

- a. **Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on locale.

**Table 2: Differences In Mental Health Among Women Teachers Of Secondary Schools Based On Locale**

Locale	N	Mean	SD	't' value	Level of Significance
Rural	204	120.56	17.09	2.68	Significant at 0.05 ( $p < 0.05$ )
Urban	201	124.85	15.04		

Table 2 The calculated 't' value is 2.681, which is significant at .05 level. Hence, the null hypothesis is rejected. It is concluded that there is significant difference in mean score of Mental Health of Women teachers of Secondary Schools in Rural and Urban areas. So, the null hypothesis that there is no significant difference in level of Mental Health among Women Teachers of Secondary Schools of Rural and Urban is not accepted. The mean score of Urban Women teachers is higher than the mean score of Rural Women teachers. This means that the Women teachers from Urban Secondary Schools have good mental health than the Women teachers from Rural Secondary Schools.

- b. **Ho:** There is no significant difference in Mental Health among Women Teachers of Secondary Schools based on society.

**Table 3: Differences In Mental Health Among Women Teachers Based On Society**

Society	N	Mean	SD	't' value	Level of Significance
Matrilineal	346	122.18	16.35	1.542	Not significant at 0.05 ( $p > 0.05$ )
Patriarchal	59	125.69	15.31		

Table 3 The calculated 't' value is 1.542, which is not significant at .05 level. Hence, the null hypothesis that there is no significant difference in the level of Mental Health of Women teachers from Matrilineal and Patriarchal society is accepted. Hence, the mean score of Women teachers from Patriarchal society is higher than the mean score of Women teachers from matrilineal society. The social background does not affect the mental health of Women Teachers.

- c. **Ho:** There is no significant difference in Mental Health among Women Teachers of Secondary Schools of based on Marital Status.

**Table 4: Differences in Mental Health Among Women Teachers Based On Marital Status**

Marital Status	N	Mean	SD	't' value	Level of Significance
Married	258	122.65	16.26	0.55	Not Significant at 0.05 ( $p > 0.05$ )
Unmarried	122	122.66	16.35		
Married	258	122.65	16.26	1.07	Not Significant at 0.05 ( $p > 0.05$ )
Widow	17	127.00	14.99		
Unmarried	122	121.66	16.35	1.27	Not Significant at 0.05 ( $p > 0.05$ )
Widow	17	127.00	14.99		

In Table 4, the calculated 't' values are lesser than the table value, so the null hypotheses is accepted at 0.05 level of significance. Hence, the null hypotheses that there is no significant difference in the Mental Health between Married and Unmarried, Widow and Unmarried, Unmarried and Widow Women teachers is accepted. This indicates that marital status does not affect the mental health of Women Teachers.

- d. **Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on Educational Qualification.

**Table 5: Differences In Mental Health Of Women Teachers Of Secondary Schools Based On Educational Qualification**

Educational Qualification	N	Mean	SD	't' value	Level of Significance
Graduate	231	122.89	16.94	0.53	Not Significant at 0.05 ( $p > 0.05$ )
Post-Graduate	161	121.99	15.52		

Educational Qualification	N	Mean	SD	't' value	Level of Significance
Graduate	231	122.89	16.94	1.03	Not Significant at 0.05 ( $p > 0.05$ )
Under-Graduate	13	127.77	11.08		
Post-Graduate	161	121.99	15.52	1.31	Not Significant at 0.05 ( $p > 0.05$ )
Under-Graduate	13	127.77	11.08		

In Table 5, the calculated 't' value is lesser than the table value so, the null hypotheses is accepted at 0.05 level of significance. It indicates that qualification does not affect the mental health of Women Teachers.

- e. **Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on Teaching Experience

**Table 6: Differences In Mental Health Of Women Teachers Of Secondary Schools Based On Teaching Experience**

Teaching Experience	N	Mean	SD	't' value	Level of Significance
5 upto 10 years	106	121.67	15.83	1.19	Not Significant at 0.05 level ( $p > 0.05$ )
11 upto 15 years	72	124.58	16.24		
5 upto 10 years	106	121.67	15.83	1.85	Not Significant at 0.05 level ( $p > 0.05$ )
Above 15 years	117	125.58	15.74		
5 upto 10 years	106	121.67	15.83	2.61	Significant at 0.05 level ( $p < 0.05$ )
Below 5 years	9	136.11	17.18		
11 upto 15 years	72	124.58	16.24	4.18	Significant at 0.05 level ( $p > 0.05$ )
Above 15 years	117	125.58	15.74		
11 upto 15 years	72	124.58	16.24	2.00	Significant at 0.05 level ( $p < 0.05$ )
Below 5 years	9	136.11	17.18		
Above 15 years	117	125.58	15.74	1.922	Not Significant at 0.05 level ( $p > 0.05$ )
Below 5 years	9	136.11	17.18		

In Table 6, the calculated 't' value is lesser than the table value at 0.05, for the level of Mental Health between Women Teachers having Teaching Experience, 5 upto 10 years and 11 upto 15 years, 5 upto 10 years and Above 15 years and Below 5 years and Above 15 years. Hence, the null hypothesis is accepted at 0.05 level of significance. The hypothesis that there is no significant difference in the level of mental health of Women Teachers, 5 upto 10 years and 11 upto 15 years, 5 upto 10 years and Above 15 years and Below 5 years and Above 15 years is accepted.

In Table 6, the calculated 't' value are greater than table value at 0.05, for the level of Mental Health of Women teachers having Teaching Experience, 5 Upto 10 years and Below 15 years, 11 upto 15 years and Above 15 years and 11 upto 15 years and Below 5 years. Hence, the null hypothesis is not accepted at 0.05 level of significance. The hypothesis a that there is no significant difference in the level of Mental Health of Women teachers of Secondary School having Teaching experience, 5 Upto 10 years and Below 15 years, 11 upto 15 years and Above 15 years and 11 upto 15 years and Below 5 years is not accepted. It can be concluded that the Women teacher having Below 5 years of teaching experience have good mental health than other Women teachers with teaching experience, 5 upto 10 years, 11 upto 15 years and above 15 years.

- f. **Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on Management

**Table 7: Differences In Mental Health Of Women Teachers Of Secondary Schools Based On Management**

Management	N	Mean	SD	't' value	Significance
Government	35	124.94	13.76	0.20	Not Significant at 0.05 level ( $p > 0.05$ )
Government Aided	122	125.56	16.52		
Government	35	124.94	136.76	1.38	Not Significant at 0.05 level ( $p > 0.05$ )
Private	248	120.96	16.23		
Government Aided	122	125.56	16.52	2.55	Significant at 0.05 level ( $p < 0.05$ )
Private	248	120.96	16.23		

In Table 7, the calculated 't' value is lesser than the table value at 0.05, for the Mental Health of Women teachers between Government and Government Aided Secondary Schools. Hence, the null hypothesis that there is no significant difference in the Mental Health among Women Teachers of Government and Government Aided is accepted.

In Table 7, the calculated 't' value is lesser than the table value at 0.05, for the Mental Health of Women teachers between Government and Private Secondary



Schools. Hence, the null hypothesis that there is no significant difference in the Mental Health among Women Teachers of Government and Private Secondary Schools is accepted.

In Table 7, the calculated 't' value is greater than table value at 0.05, for the mental health of Women teachers of Government Aided and Private Secondary Schools. Hence, the null hypothesis that there is no significant difference in the Mental Health among Women Teachers of Government Aided and Private Secondary Schools is not accepted.

**g. Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on Training.

**Table 8: Differences In Mental Health Between Of Women Teachers Of Secondary Schools Based On Training**

Training	N	Mean	SD	't' value	Level of Significance
B.Ed	242	123.50	16.22	0.60	Not Significant at 0.05 level (p>0.05)
D.El.Ed	37	121.81	15.38		
B.Ed	242	123.50	16.22	1.18	Not Significant at 0.05 level (p>0.05)
No Training	126	121.38	16.51		
D.El.Ed	37	121.81	15.38	0.14	Not Significant at 0.05 level (p>0.05)
No Training	126	121.38	16.51		

In Table 8, the calculated 't' value is lesser than the table value at 0.05 level, for the Mental Health of Women teachers having B.Ed and D.El.Ed, B.Ed and No Training and D.El.Ed and No Training. Hence, the null hypothesis that there is significant difference in the Mental Health of Women teachers having B.Ed and D.El.Ed, B.Ed and No Training and D.El.Ed and No Training is accepted. It indicates that training does not affect the mental health of Women Teachers.

**h. Ho:** There is no significant difference in level of Mental Health among Women Teachers of Secondary Schools based on Age

**Table 9: Differences In Mental Health Of Women Teachers Of Secondary Schools Based On Age**

Age Group	N	Mean	SD	't' value	Significance
21 to 31 years	110	118.75	16.192	2.267	Significant at 0.05 level (p<0.05)
32 to 41 years	187	123.19	16.348		
21 to 31 years	110	118.75	16.192	3.216	Significant at 0.05 level (p<0.05)
42 to 51 years	96	125.86	15.404		
21 to 31 years	110	118.75	16.192	1.373	Not Significant at 0.05 level (p>0.05)
Above 51 years	12	125.50	15.906		
32 to 41 years	187	123.19	16.348	1.327	Not Significant at 0.05 level (p>0.05)
42 to 51 years	96	125.86	15.404		
32 to 41 years	187	123.19	16.348	0.475	Not Significant at 0.05 level (p>0.05)
Above 51 years	12	125.50	15.906		
42 to 51 years	96	125.86	15.404	0.077	Not Significant at 0.05 level (p>0.05)
Above 51 years	12	125.50	15.906		

In Table 9, the calculated 't' value is lesser than the table value at 0.05 level, for the Mental Health of Women teachers between the Age group 21 to 31 years and Above 51 years, 32 to 41 years and 42 to 51 years, 32 to 41 and Above 51 years, and 42 to 51 years and Above 51 years. Hence, the null hypothesis that there is no significant difference in level of Mental Health among Women Teachers of Secondary Schools between the age group 21 to 31 years and Above 51 years, 32 to 41 years and 42 to 51 years, 32 to 41 and Above 51 years, and 42 to 51 years and Above 51 years is accepted.

In Table 9, the calculated value of 't' value is greater than the table value at 0.05 level, for the Mental Health of Women teachers between the age group 21 to 31 years and 32 to 41 years and between 21 to 31 years and 42 to 51 years. Hence, the null hypothesis that there is no significant difference in level of Mental Health among Women Teachers of Secondary Schools between the age group 21 to 31 years and 32 to 41 years and between 21 to 31 years and 42 to 51 years is not accepted.

## 7. FINDINGS:

From the analysis of Mental Health of Women Teachers of Secondary School the following observations have been made:

- The Women teachers of Secondary Schools of Meghalaya have Weak Mental Health.
- The Women teachers from Urban Secondary Schools have good mental health than the Women teachers from Rural Secondary Schools.

- The Women teachers from Patriarchal Society have good mental health than women teachers from Matrilineal society.
- The Under-Graduate Women Teachers have good mental health than the Graduate and Post- Graduate Women Teachers.
- The Women teachers having Below 5 years of teaching experience have good mental health than other Women teachers with teaching experience, 5 upto 10 years, 11 upto 15 years and above 15 years.
- The Women teachers of Government Aided Secondary Schools have good mental health than Women Teachers of Government and Private Secondary Schools.
- The Women teachers having B.Ed have good mental health than Women teachers having D.El.Ed and No Training.
- The Women teachers of the age between 42 to 51 years have good mental health than other women teachers of the age between 21 to 31 years, 32 to 41 years and Above 51 years.

## 8. CONCLUSION:

The study reveals that the mental health of Women Teachers of Meghalaya is weak. Women Teachers from matrilineal society needs help to improve their mental health. A mentally healthy and well adjusted women teacher plays a vital role in promoting mental health of students. Only if the teacher is free from worries, anxieties and tensions then only she can impart the function of promoting mental health and mental hygiene. Thus, in order to develop sound mental health in students, a teacher herself has to pose sound mental health. The general stability of the women teacher is of utmost importance in balance and controlled emotional development of the students.

## 9. SUGGESTION:

- As there are still many untrained women teachers in schools, teachers should be encouraged to undergo in-service training. The school management should arrange in-service training for teachers to refresh their knowledge of content and teaching methods (Galgotra, 2013).
- It is necessary for the school to have a School Guidance and Counselling cell which is functioning to caters to the needs of the teachers and students. The School Guidance and Counselling cell will help to solve mental, psychological and health related problems of teachers and students (Grosy, Panwar, & Kumar, 2015).
- Mental health promotion related workshops, seminar, group discussions and conferences should be organized at the interschool level then only teachers can benefit. According to Ranganathan (2012) emphasized the framework for school mental health services must be promotional, preventive, conservative and curative and should include goals, objective, concrete activities and services which prevent problems from arising and through this approach promote teacher's well-being. The importance of mental health promotion should be to focus throughout lifespan to ensure a healthy start in life for children and to prevent mental disorders in adulthood and old age (Pathak, 2014).

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